

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF ANTHONY LAFAUCI	COURT CASE NUMBER 04 - 12608 - REK
DEFENDANT THOMAS McINTYRE	TYPE OF PROCESS CIVIL ACTION

SERVE ➔ AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN CEDAR-JUNCTION WALPOLE STATE PRISON
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) P.O. BOX 100 2450 MAIN STREET SOUTH WALPOLE, MASSACHUSETTS 02071 - 0100

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: ANTHONY LAFAUCI OSBORN CORRECTIONAL INSTITUTION P.O. BOX 100 SOMERS, CONNECTICUT 06071	Number of process to be served with this Form - 285 1
	Number of parties to be served in this case 26
	Check for service on U.S.A. YES

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):
Fold

Signature of Attorney or other Originator requesting service on behalf of: <i>Anthony LaFauci</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE 6/08/05
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 14	District to Serve No. 38	Signature of Authorized USMS Deputy or Clerk <i>Honey Salameh</i>	Date 6/6/05
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☒ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
Address (complete only if different than shown above)	Date of Service 6/8/05

Service Fee 67.50	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges 67.50	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:

UNITED STATES DISTRICT COURT

District of Massachusetts

Anthony Lafauci,
Plaintiff,

SUMMONS IN A CIVIL CASE

V.
Peter Pepe, Jr., et al.,
Defendants

CASE NUMBER: C.A. No. 04-12608-REK

TO: (Name and address of Defendant)

Thomas McIntyre

CEDAR-JUNCTION MCI WALPOLE
P.O. BOX 100
2450 MAIN STREET
SOUTH WALPOLE, MASSACHUSETTS

02071 - 0100

YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

Anthony Lafauci, pro se

OSBORN CORRECTIONAL INSTITUTION
P.O. BOX 100
SOMERS, CONNECTICUT
06071

an answer to the complaint which is herewith served upon you, within twenty (20) days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

Sarah A. Thornton
CLERK

(By) DEPUTY CLERK

April 22, 2005

DATE

UNITED STATES DISTRICT COURT

District of Massachusetts

Anthony Lafauci,
Plaintiff,

SUMMONS IN A CIVIL CASE

V.
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CASE NUMBER: C.A. No. 04-12608-REK

TO: (Name and address of Defendant)

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Sarah A. Thornton
CLERK

(By) DEPUTY CLERK

April 22, 2005

DATE